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### Application of Optical Number

Substitute for Form PTO-875

Assi

Application of Doctor Number  
09/1988/65

**CLAIMS AS FILED - PART I**

(Column 1)

(Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.104(f))		
TOTAL CLAIMS (37 CFR 1.104(g))	minus 20 =	*
INDEPENDENT CLAIMS (37 CFR 1.104(h))	minus 8 =	*
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.104(i))		

\* If the difference in column 1 is less than zero, enter "0" in column 2.

**CLAIMS AS AMENDED - PART II**

(Column 1)

(Column 2)

(Column 3)

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (27 CFR 1.146g)	15	Minus	20	0
	Indepent (27 CFR 1.146g)	1	Minus	3	8
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (27 CFR 1.146d)					

## SMALL ENTITY

**CR**

**OTHER THAN  
SMALL ENTITY**

RATE	ADDITIONAL FEE
X \$ _____	
X \$ _____	
\$ _____	
<b>TOTAL ADD'L FEE</b>	

**CR**

SMALL ENTITY	
RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADDL. FEE	

## AMENDMENT B

(Continued)

(Column 2)

(Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.501)	17	20	-
Independent (37 CFR 1.502)	1	3	-

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS (37 CFR 1.104)

[illegible]

RATE	ADD
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RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
<b>TOTAL ADDL FEE</b>	

RATE	ADDITIONAL FEE
X 6 _____ =	
X 6 _____ =	
+ 9 _____ =	
<b>TOTAL ADD'L FEE</b>	

## AMENDMENT C

(Column 1)

(Column n 2)

(Column 3)

AMENDMENT C	7/6/07	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (7 CFR 1.100)	17	Minus	20	0
	Independent (7 CFR 1.100)	1	Minus	3	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (7 CFR 1.10(c))					

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RATE	ADD
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RATE	ADDITIONAL FEE
X 2 _____ =	
X 2 _____ =	
+ 2 _____ =	
TOTAL ADD. FEE	

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RATE	ADDITIONAL FEE
X 2 _____ =	
X 2 _____ =	
+ 3 _____ =	
TOTAL ADDL FEE	

- \* If the entry in column 1 is less than the entry in column 2, write "V" in column 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  
 The "Highest Number Previously Paid For" (total or independent) is the highest number

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Correspondence for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

**If you need assistance in completing the form, call 1-800-PTO-9169 and select option 2.**